

## A world fit for children?

A UNICEF report published on Dec 10 gives the most comprehensive data to date on progress towards the Millennium Development Goals (MDGs). Although there has been much international attention focused on MDG-4—to reduce under-5 mortality by two-thirds between 1990 and 2015—the report also details child-focused statistical information on all of the eight MDGs, in addition to data on World Fit for Children targets. These targets cover important factors in child health and wellbeing which are not included in the MDGs, such as child labour, violence, and discrimination.

The report combines all appropriate and latest available information and relies on data from UNICEF global databases, Multiple Indicator Cluster Surveys, and Demographic and Health Surveys, which vary in the time period in which information is collected and collated. Therefore, although some statistics in the report are new, other figures are more familiar.

Although the number of children who die before their fifth birthday has fallen below 10 million, many countries, particularly in sub-Saharan Africa and south Asia, have made little progress. There is no information available on mortality rates from some countries, which is unsurprising given that a staggering 51 million children born in 2006 have not had their births registered. As highlighted in our recent *Who Counts?* Series, such data gaps are serious and hamper international efforts to devise sensible strategies to protect children.

Pneumonia remains the most common cause of death in children under 5 years, taking the lives of more children than AIDS, malaria, and measles combined. Yet according to 2006 data, the percentage of children under 5 years with suspected pneumonia who receive antibiotics is dismally low—in Haiti this proportion is only 3%. And, in sub-Saharan Africa, only 40% of children with suspected pneumonia are taken to an appropriate health provider. Lack of access to appropriate treatment is a recurring theme throughout the UNICEF report. In 2006, 380 000 children died of largely preventable AIDS-related causes and only 15% of children received antiretroviral therapy.

The non-MDG information is more difficult to quantify. For example, the number of children displaced because of conflict—around 8 million—is only an estimate. For discrimination due to disability, the results of a survey in

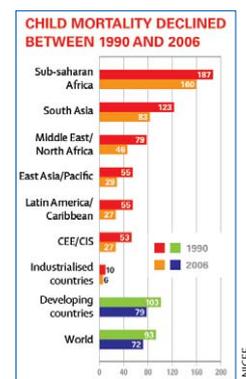
17 countries, presented for the first time in the report, are limited to only quantifying the number of 2–9 year-old children with at least one disability.

There are three important key messages from the UNICEF report. First, there have been advances in certain indicators in child health—vitamin A provision, insecticide-treated bednet coverage, and exclusive breastfeeding. Second, indicators depending on a functional health system—for example, the treatment of malaria—have largely stalled. Finally, countries mired in violent conflict or afflicted by HIV are finding it especially hard to respond to children's needs.

One frustration with this welcome wealth of statistical information is that there is little attempt to put any of the data into context with recent global initiatives for child health, such as the Global Business Plan—an initiative led by the Prime Minister of Norway to intensify efforts to accelerate progress towards MDG-4.

Statistics can be a useful tool for advocacy. But information can only be truly effective when used as a springboard for further action. For instance, the international community has known for years about the appalling figures on access to essential medicines for children. Every year the deaths of about 6 million children could be prevented if only they had access to available, safe, effective, and affordable medicines. Yet, although most welcome, it was only last week that WHO officially launched an initiative—*Make Medicines Child Size*—which aims to target a range of medicines that still require paediatric formulations. The initiative also includes the first international list of 206 essential medicines for children. This initiative deserves to be widely supported since it promises to be one of the most effective international levers to improve child health.

Mahatma Gandhi famously said, “the greatness of a nation and its moral progress can be judged by the way its animals are treated”. Surely the way in which nations treat children is a better indicator of status and decency? The UNICEF report is a stark reminder that a world fit for children is still a distant aspiration. Although there have been some advances made so far, the international community should not become complacent and must further increase its efforts to do more to improve the health of one of the world's most vulnerable groups. ■ *The Lancet*



Trends in under-5 mortality rate per 1000 livebirths

For *Progress for Children: A world fit for children statistical review* see [http://www.unicef.org/publications/index\\_42117.html](http://www.unicef.org/publications/index_42117.html)

For more on *Make medicines child sized* see <http://www.who.int/mediacentre/news/releases/2007/pr63/en/index.html>

For the *Lancet Who Counts?* Series see <http://www.thelancet.com/online/focus/who-counts/collection>